

## Conemaugh School of Nursing & Allied Health Programs Transcript Request

To request a transcript, please complete the information below. All official transcripts are mailed using first class mail because the School's Seal cannot be affixed to a fax or electronic copy. (Please allow time for standard mail delivery). Unofficial transcripts may be faxed or emailed. During the academic year the transcript requests are processed within 1-2 days of receipt of your request. There is no fee to process Official and Unofficial Transcripts.

Number ofTranscripts Requested	Official Transcript Requested	Unofficial Transcript Requested
Select Program of Study:		
School of Nursing	School of EMS	School of Histotechnology
School of Medical Laboratory Science	School of Radiologic Technology	School of Surgical Technology
Current Name:		
Name under which you attended	d the program:	
Year of graduation/attendance:		
Phone:		
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Complete name and address of	where the transcript is to be ma	niled:
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Return this form to:

Conemaugh School of Nursing & Allied Health Programs

Attn: Transcript Request 1086 Franklin Street Johnstown, PA 15905-4398